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(Requestor's Name)	
. (Address)	
· (Address)	
(City/State/Zip/Phone #)	
(<i>)</i>	
PICK-UP WAIT MAIL	
(Dusiness F-Nh. Marra)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
L. SELLERS	
MAR 3 0.2010	
EXAMINER	
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SECRETARY OF STATE TALLAHASSEE, ELORIDA

MAR 29 PM 2: 2



March 15, 2010

BRICKELL & 5TH, LLC 927 LINCOLN ROAD, STE. 214 MIAMI BEACH, FL 33139

SUBJECT: BRICKELL & 5TH, LLC Ref. Number: L07000022930

We have received your document for BRICKELL & 5TH, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Enclosed is the proper form for changing a registered agent or registered office (or both).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 610A00006327

Leslie Sellers Regulatory Specialist II

. STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: BRICKELL	. 95 th LLC	
2. (a) Principal office address of limited liability company:		
(Note: MUST BE STREET ADDRESS)	Miani Beach, Fl. 33139	
(Note: MUST BE STREET ADDRESS)	1011am 1Jeach, 11: 33137	
(b) Mailing address of limited liability company:	927 Lincoln Rd.	
(Note: MAY BE POST OFFICE BOX)	Svile 214 Miami Beach Fl. 33139	
2-28-07 3. Date of filing/registration in Florida	L07000022930	
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dent, of State:	
	SAM HERZBERG	
	1000 South Point Drive	
Registered Office Address:	Apt. 3301	
	Miami Beach, Fl. 33138	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	927 Lincoln Rd.	
MUST BE PLUKIDA STREET ADDRESS	Miami Reach ,FL 33139	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member		
SAM HERZBERG	TAS -1	
Printed or typed name of signee	CE O HA	
I hereby accept the appointment as registered agent and agree to act in this capacity fruither agree to comply with the provisions of all statutes relative to the proper and complete performance of my diffice, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608/FS. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.		
Signature of Registered Agent SAM HERZBERG.	2: 2 STAT LOR	
Division of Cornerations P.O. Roy 6327 Tallahassee FI 323 12000 -		

FILING FEE: \$25.00